

## RTM Change Request Form

Today's Date: 1/17/97

Authorizing CCR Number: 97-0081

Originator: Carol Chachulski

Schema Impact:

☐

yes

☒

no

Affected RTM Class Name: Level 4

Name of Coordinator: \_\_\_\_\_ Date Received: \_\_\_\_\_

General Comment or Instructions:

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List of associated text change tables that are attached:

Attachment 1: Modify Clarification Text

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List of associated link change tables that are attached:

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Data Entry By: \_\_\_\_\_ Date Received: \_\_\_\_\_

Comments:

Type of change

Done or N/A

Date

Text

☐

\_\_\_\_\_

\_\_\_\_\_

Links

☐

\_\_\_\_\_

\_\_\_\_\_

CCR Links

☐

\_\_\_\_\_

\_\_\_\_\_

QA'ed By: \_\_\_\_\_ Date Received: \_\_\_\_\_

Comments:

QO check

Done or N/A

Date

Text

☐

\_\_\_\_\_

\_\_\_\_\_

Links

☐

\_\_\_\_\_

\_\_\_\_\_

CCR Links

☐

\_\_\_\_\_

\_\_\_\_\_

QO report attached

☐

yes

☐

no